

<b>REQUEST FOR QUOTATION</b> (This is NOT an Order)		This RFQ <input type="checkbox"/> is <input checked="" type="checkbox"/> is not a small business set-aside		Page 1 Of 4
1. Request No. W31P4Q-07-Q-0020		2. Date Issued 2007JUL13		3. Requisition/Purchase Request No. See Schedule
4. Cert For Nat Def. Under BDSA Reg. 2 and/or DMS Reg. 1		Rating DOA2		
5A. Issued By US ARMY AVIATION & MISSILE COMMAND AMSAM-AC-SM-C REDSTONE ARSENAL AL 35898-5280		6. Deliver by (Date) See Schedule		
5B. For Information Call: (Name and telephone no.) (No collect calls) CHARLENE BELL (256) 842-7384 EMAIL: CHARLENE.BELL@US.ARMY.MIL		7. Delivery <input checked="" type="checkbox"/> FOB Destination <input type="checkbox"/> Other		
8. To: Name and Address, Including Zip Code		9. Destination (Consignee and address, including Zip Code)  See Schedule		
10. Please Furnish Quotations to the Issuing Office in Block 5A On or Before Close of Business (Date) 2007JUL20		IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please indicate on this form and return it to the address in Block 5B. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any interpretations and/or certifications attached to this Request for Quotation must be completed by the quoter.		

11. Schedule (Include applicable Federal, State, and local taxes)					
Item Number (a)	Supplies/Services (b)	Quantity (c)	Unit (d)	Unit Price (e)	Amount (f)
	(See Schedule)				

12. Discount For Prompt Payment	a. 10 Calendar Days	b. 20 Calendar Days	c. 30 Calendar Days	d. Calendar Days	
	%	%	%	Number	Percentage

NOTE: Additional provisions and representations ☐ are ☐ are not attached.

13. Name and Address of Quoter (Street, City, County, State and Zip Code)	14. Signature of Person Authorized to Sign Quotation		15. Date of Quotation
	16. Signer		
	a. Name (Type or Print)	b. Telephone	
	c. Title (Type or Print)	Area Code	
			Number

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 2 of 4
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Name of Offeror or Contractor:

SUPPLEMENTAL INFORMATION

A-1 SEA WIRE AND CABLE COMPANY WILL PERFORM THE REQUIREMENT TO DELIVER 170 EACH 50 FEET VIDEO GRAPHIC ADAPTER (VGA) CABLE WITH MALE TO MALE PLUGS FOR INCLUSION INTO COMMAND CENTER SYSTEM.

A-2 PERIOD OF PERFORMANCE: SEA WIRE AND CABLE COMPANY WILL DELIVER WITHIN SEVEN (7) DAYS AFTER RECEIPT OF ORDER.

\*\*\* END OF NARRATIVE A0001 \*\*\*

Name of Offeror or Contractor:

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	SUPPLIES OR SERVICES AND PRICES/COSTS				
	VGA CABLES	170	EA	\$ _____	\$ _____
	NOUN: VIDEO GRAPHIC ADAPTER CABLES SECURITY CLASS: Unclassified				
	Description/Specs./Work Statement TOP DRAWING NR: CB3750MR				
	Inspection and Acceptance INSPECTION: DestinationACCEPTANCE: Destination				

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Name of Offeror or Contractor:

LIST OF ATTACHMENTS

List of Addenda	Title	Date	Number of Pages	Transmitted By
Attachment 0001	STATEMENT OF WORK		001	